

Registration No.: 41,253

Docket No. 214314US30

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Rita Lorena SALAZAR LEAL

SERIAL NO: New Application

FILING DATE: Herewith

FOR: THERMOCHROMIC CAP

FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

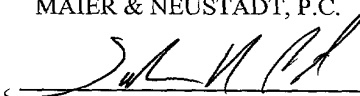
| FOR | NUMBER FILED | NUMBER EXTRA | RATE | CALCULATIONS |
|--|-----------------|-----------------|-----------|--------------|
| TOTAL CLAIMS | 18 - 20 = | 0 | × \$18 = | \$0.00 |
| INDEPENDENT CLAIMS | 4 - 3 = | 1 | × \$84 = | \$84.00 |
| <input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable) | | | + \$280 = | \$0.00 |
| <input checked="" type="checkbox"/> LATE FILING OF DECLARATION | | | + \$130 = | \$130.00 |
| BASIC FEE | | | | \$740.00 |
| TOTAL OF ABOVE CALCULATIONS | | | | \$954.00 |
| <input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY | | | | \$0.00 |
| <input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE | | | + \$130 = | \$0.00 |
| <input type="checkbox"/> RECORDATION OF ASSIGNMENT | | | + \$40 = | \$0.00 |
| TOTAL | | | | \$954.00 |

RECEIVED 1/8/02

- ☒ Please charge Deposit Account No. 15-0030 in the amount of \$954.00. A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.


Robert T. Pous

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